

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213518092		
1.) CORPORATION NAME: BRADSHAW HEALTH CARE SOLUTIONS, INC.		DUE DATE: 5/31/2013		
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: KATHRYN W BRADSHAW 8904 RAMS CROSSING CT RICHMOND, VA		SCC ID NO: 07093255		
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: CHESTERFIELD COUNTY		5.) STOCK INFORMATION		
4.) STATE OR COUNTRY OF INCORPORATION: VA		<table border="1" style="border-collapse: collapse;"> <tr> <td style="padding: 2px;">CLASS</td> <td style="padding: 2px;">AUTHORIZED</td> </tr> </table>	CLASS	AUTHORIZED
CLASS	AUTHORIZED			
6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 2631 W Hundred Rd CITY/ST/ZIP: Chester, VA 23831				
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.				
NAME: KATHRYN W BRADSHAW TITLE: DIR/PRES ADDRESS: 2631 W Hundred Rd CITY/ST/ZIP/CO: Chester, VA 23831		<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.				
/s/ KATHRYN W BRADSHAW SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	KATHRYN W BRADSHAW, DIR/PRES PRINTED NAME AND CORPORATE TITLE	4/16/2013 DATE		
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.				